

IM5 (Pediatrics) Critical Thinking Worksheet

Patient Age: 4 y/o

Patient Weight: 23.7kg

Student Name: Brooke Hardin	Unit: PEDI Pt. Initials: N.G.	Date: 9/27/2022
1. Disease Process & Brief Pathophysiology (Identify Key Concepts to Your Patient and Include Reference): Appendicitis, is inflammation of the appendix. Mucosal ulceration will trigger inflammation that will obstruct the appendix. The obstruction also blocks the outflow of mucus so the pressure is in the appendix. The pressure in the appendix will increase because the bacteria will multiply and the inflammation and pressure will continue to increase. Blood flow will be cut off and that is what causes the severe abdominal pain.	2. Factors for the Development of the Disease/Acute Illness: -mucosal ulceration -fecal mass -stricture -barium ingestion -viral infection -neoplasm -foreign body	3. Signs and Symptoms: -right side abdominal pain (P) -fever (P) -vomiting (P) -not eating (P) -difficulty walking (P) -tenderness (P)
4. Diagnostic Tests Pertinent or Confirming of Diagnosis: -abdominal CT with contrast (P) -abdominal ultrasound (P) -CBC (WBC) (P)	5. Lab Values That May Be Affected: -WBC (P) -electrolytes -c-reactive protein (P) -CBC	6. Current Treatment (Include Procedures): -place JP drain

Student Name: Brooke Hardin	Unit: PEDI Pt. Initials: N.G.	Date: 9/27/2022
<p>7. Pain & Discomfort Management: List 2 Developmentally Appropriate Non-Pharmacologic Interventions Related to Pain & Discomfort for This Patient.</p> <ol style="list-style-type: none"> 1. distraction with TV 2. coloring <p>*List All Pain/Discomfort Medication on the Medication Worksheet Click here to enter text.</p>	<p>8. Calculate the Maintenance Fluid Requirement (Show Your Work):</p> $10 \times 100 = 1000$ $10 \times 50 = 500$ $3.7 \times 20 = 74$ $1000 + 500 + 74 = 1574\text{mL}/24\text{hr}$ $1574 / 24 = 65.58 = 66\text{mL}/\text{hr}$ <p>Actual Pt MIVF Rate: 62mL/hr</p> <p>Is There a Significant Discrepancy? No</p> <p>Why? Because the actual maintenance fluid rate is only 4mL less than the maintenance fluid requirement.</p>	<p>9. Calculate the Minimum Acceptable Urine Output Requirement (Show Your Work):</p> $0.5\text{mL} \times 23.7\text{kg} = 11.85 = 12\text{mL}/\text{hr}$ <p>Actual Pt Urine Output: 225mL</p>

Student Name: Brooke Hardin	Unit: PEDI Pt. Initials: N.G.	Date: 9/27/2022
	<p>10. Growth & Development: List the Developmental Stage of Your Patient For Each Theorist Below and Document 2 OBSERVED Developmental Behaviors for Each Theorist. If Developmentally Delayed, Identify the Stage You Would Classify the Patient:</p> <p>Erickson Stage: initiative vs guilt</p> <ol style="list-style-type: none"> 1. I observed my patient choosing the role of the doctor when she was playing with the childlife specialist. 2. I observed my patient feeling upset that she was not able to go home yet. <p>Piaget Stage: preoperational</p> <ol style="list-style-type: none"> 1. I observed my patient putting an "IV" and "JP drain" into their doll and pretended like the doll was her and that she was the doctor. 2. I observed my patient starting to become anxious when their mom left the room. 	
<p>11. Focused Nursing Diagnosis: acute pain</p>	<p>15. Nursing Interventions related to the Nursing Diagnosis in #11:</p> <ol style="list-style-type: none"> 1. Turning on the TV. <p>Evidenced Based Practice: This will distract the patient and even though they are still in pain they will not realize that they are hurting.</p>	<p>16. Patient/Caregiver Teaching:</p> <ol style="list-style-type: none"> 1. Educate the patient and caregiver how to keep the site with the JP drain clean and dry 2. Educate the patient to not touch or pull at the JP drain. 3. Educate the patient
<p>12. Related to (r/t): ruptured appendix</p>	<ol style="list-style-type: none"> 2. Place a cold compress on the site of pain <p>Evidenced Based Practice: This will help reduce the patients pain because it will decrease the release of pain-inducing chemicals.</p>	

Student Name: Brooke Hardin	Unit: PEDI Pt. Initials: N.G.	Date: 9/27/2022
13. As evidenced by (aeb): Pain everytime the patient moves	3. Help the patient change positions into a position that are comfortable and not in pain. Evidenced Based Practice: this helps the patients pain level decrease because certain positions will decrease the patients pain level.	17. Discharge Planning/Community Resources: 1. follow up appointment with doctor 2. give the patient/caregiver a pamphlet about infection prevention 3. contact case management about getting home health to help patient/patient's caregiver manage the patient's JP drain
14. Desired patient outcome: Patient will have a pain level of 0 while moving before discharge.		